


<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> (Large Entity)			Docket No. <b>1924</b>
In Re Application Of: <b>BIRKEL, S., ET AL</b>			
Serial No. <b>10/018,933</b>	Filing Date <b>12/19/2001</b>	Examiner <b>VENKAT, J.</b>	Group Art Unit <b>1615</b>
Invention: <b>COSMETIC PREPRATION IN GEL FORM</b>			
<u><b>TO THE COMMISSIONER FOR PATENTS:</b></u>			
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the Office Action of <u>04/15/2003</u> in the above-identified application. <span style="display: block; text-align: center; font-size: small;">Date</span>			
The requested extension is as follows (check time period desired): <div style="display: flex; justify-content: space-between; align-items: flex-start;"><div><input checked="" type="checkbox"/> One month    <input type="checkbox"/> Two months    <input type="checkbox"/> Three months    <input type="checkbox"/> Four months    <input type="checkbox"/> Five months</div><div style="display: flex; justify-content: space-between; width: 100%;"><div>from: <u>JULY 15, 2003</u> <span style="font-size: x-small;">Date</span></div><div>until: <u>AUGUST 15, 2003</u> <span style="font-size: x-small;">Date</span></div></div></div>			
The fee for the extension of time is <b>\$110</b> and is to be paid as follows: <div style="margin-top: 5px;"><input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <b>19-4675</b> <input checked="" type="checkbox"/> If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to Deposit Account No. <b>19-4675</b></div>			
 <span style="font-size: x-small;">Signature</span>		Dated: <b>JULY 18, 2003</b>	
CC:		<div style="border: 1px solid black; padding: 5px;"><div style="display: flex; justify-content: space-between;"><div style="width: 60%;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8, and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div><div style="width: 35%; text-align: center;">8933 194 0000004 110-00 DA</div></div><div style="border-top: 1px solid black; margin-top: 10px; text-align: center;"><span style="font-size: x-small;">Signature of Person Mailing Correspondence</span></div><div style="border-top: 1px solid black; margin-top: 10px; text-align: center;"><span style="font-size: x-small;">Typed or Printed Name of Person Mailing Correspondence</span></div></div>	

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